Billing During the NPI Contingency Period

A National Provider Identifier (NPI) contingency plan has been put in place, changing the NPI implementation date to October 1, 2007, for Montana's Healthcare Programs operated by ACS. This contingency plan affects how providers must complete claims submitted between now and October 1, 2007.

Paper Claims

Even though NPIs are not required until October 1, 2007, the new CMS-1450 (UB-04) must be used beginning May 23, 2007, and the revised CMS-1500 must be used beginning June 1, 2007. Claims submitted on the old forms after these dates will be returned to providers. When billing on paper to Montana's Healthcare Programs, providers must continue to use their current Medicaid provider number. Dental claims must contain current Medicaid/CHIP ID number. The following explains the fields to be used on the UB-04 and revised CMS-1500 forms.

Institutional Claims (CMS-1450 UB-04)

- Form Locator (FL) 57 must contain the billing provider's current Medicaid ID number.
- The second and third boxes in FL 76 must contain the attending provider's two-digit ID qualifier and current Medicaid ID number.

Professional Claims (CMS-1500 revised 08/05)

- Field 17a must contain the referring provider's two-digit ID qualifier and current Medicaid or Passport number.
- There will be no clinic/group billing until October 1, so providers must continue to bill with their Medicaid/CHIP/MHSP ID number in Field 33b. Fields 24 I and J will not be used until October 1, 2007.

Electronic claims

• Claims received prior to October 1, 2007, must contain current Medicaid ID numbers. Providers who are required to obtain NPIs may also include their NPI in addition to their current Medicaid number effective immediately, but the NPI will not be used in processing until October 1.